24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Faith Family Freedom Fund	FEC IDENTIFICATION NUMBER ▼
railii railiily rieedoili ruild	C C00489625
Check if 24-hour report X 48-hour report New report Amends report fi	led on Mam / Dab / Yayayay
Full Name of Payee CRA LEADERSHIP PAC	Date of Public Distribution/Dissemination
	05 02 / Y Y Y Y Y
Mailing Address 14311 RIVIERA DRIVE	Amount
City State Zip Code	9165.18
HUNTINGTON BEACH CA 92647	Transaction ID : SE.9769 Date of Disbursement or Obligation
Purpose of Expenditure Newsletter Category/ Type 004	04 17 / 2014
Name of Federal Candidate Support Of	ffice Sought: X House District: 52
KIRK JORGENSEN Oppose	President Senate State: CA
Calcinati Total To Bato	sbursement For: X Primary General 14 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M - M / D - D / Y - Y - Y - Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
	ffice Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	isbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	9165.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	9165.18
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Paul Tripodi [Electronically Filed] Date	05
Signature	